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CONFIRMATION NO. 2225

|                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/800,321                                                                                                                                                                                                                                                                                                                                               | <b>FILING OR 371(c) DATE</b><br>03/12/2004<br><b>RULE</b>                                                         | <b>CLASS</b><br>307             | <b>GROUP ART UNIT</b><br>2836                                                                                                                                                                                                                                                   | <b>ATTORNEY DOCKET NO.</b><br>1001 |
| <b>APPLICANTS</b><br>Issam Jabaji, Morton Grove, IL;<br>Shadi Jabaji, Morton Grove, IL;                                                                                                                                                                                                                                                                                          |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>** CONTINUING DATA *****</b>                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>** FOREIGN APPLICATIONS *****</b>                                                                                                                                                                                                                                                                                                                                             |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 05/28/2004                                                                                                                                                                                                                                                                                            |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance <i>RP</i><br>Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials |                                                                                                                   | <b>STATE OR COUNTRY</b><br>IL   | <b>SHEETS DRAWING</b><br>7                                                                                                                                                                                                                                                      | <b>TOTAL CLAIMS</b><br>69          |
|                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                   | <b>INDEPENDENT CLAIMS</b><br>11 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>ADDRESS</b><br>42938                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>TITLE</b><br>System and method for controlling and distributing electrical energy in a vehicle                                                                                                                                                                                                                                                                                |                                                                                                                   |                                 |                                                                                                                                                                                                                                                                                 |                                    |
| <b>FILING FEE RECEIVED</b><br>1620                                                                                                                                                                                                                                                                                                                                               | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                 | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                    |